



U.S. Department
of Transportation
**National Highway
Traffic Safety
Administration**

Auto Safety Hotline

Vehicle Owner's Questionnaire

**NATIONWIDE 1-800-424-9393
DC METRO AREA (202) 366-0123
INTERNET: <http://www.nhtsa.dot.gov>**

FOR AGENCY USE ONLY 1362

Date Received

17-JAN-2002

Od_or _____
rt_dt _____
pd_rt _____
rp_lr _____

Reference No.

8002368

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO
In the absence of an authorization, NHTSA WILL NOT provide your name and address to the vehicle manufacturer.

Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) <small>(Location at bottom of and/or above windshield)</small>	Vehicle Make	Vehicle Model	Vehicle Year	Current Odometer Reading		
WAUHE5448MN01308	AUDI	QUATTRO	1991			
Purchase Date <input type="checkbox"/> New <input checked="" type="checkbox"/> Used	Dealer's Name _____ City _____ State _____ Zip Code _____		Engine Size (CID/CC/L) _____ No Cylinders _____	<input type="checkbox"/> Turbo <input type="checkbox"/> Diesel <input type="checkbox"/> Gas <input type="checkbox"/> Fuel Injectio		
Transmission Type <input type="checkbox"/> Manual <input type="checkbox"/> Automatic	Antilock Brakes <input type="checkbox"/> Yes <input type="checkbox"/> No	Restraint System <input type="checkbox"/> 3-Point Belt <input type="checkbox"/> Motorbelt <input type="checkbox"/> Driverside Airbag <input type="checkbox"/> 2-Point Bel <input type="checkbox"/> Passengerside Airbag	Cruise Control <input type="checkbox"/> Yes <input type="checkbox"/> No	Drive Train <input type="checkbox"/> Front <input type="checkbox"/> Rear <input type="checkbox"/> 4-Wheel	Vehicle Type <input type="checkbox"/> Car <input type="checkbox"/> Sport Util <input type="checkbox"/> Van <input type="checkbox"/> Truck <input type="checkbox"/> Minivan <input type="checkbox"/> Motorcycle <input type="checkbox"/> Other _____	Body Style <input type="checkbox"/> 2-Door <input type="checkbox"/> 4-Door <input type="checkbox"/> Stationwagon <input type="checkbox"/> Pick Up Truck <input type="checkbox"/> Other _____

FAILED COMPONENT(S)/PART(S) INFORMATION

Component 03270000	Part Name(s) BRAKES:HYDRAULIC:SHOE:DISC BRAKE SYSTEM	Location <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Front <input type="checkbox"/> Rear	Failed Part's <input type="checkbox"/> Original <input type="checkbox"/> Replacement
No of Failure	Dates of Failure(s) _____ Mileage at Failure(s) _____ Vehicle Speed at Failure(s) _____	Failed Part(s) <input type="checkbox"/> Yes <input type="checkbox"/> No	NHTSA Previously <input type="checkbox"/> Yes <input type="checkbox"/> No

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(ies) on the back of this form)

Crash <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Persons Injured	Number of Fatalities	Estimated Property Damag	Reported to Police <input type="checkbox"/> Yes <input type="checkbox"/> No
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NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHEN APPLYING BRAKES VEHICLE VIBRATES. PLEASE PROVIDE ADDITIONAL INFORMATION. *AK

CONTINUED ON REVERSE

The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.

DOT Auto Safety Hotline
 U.S. Department of Transportation
 National Highway Traffic Safety Administration
 www.nhtsa.dot.gov/hotline
 1-888-327-4238
 NATIONWIDE 1-888-DASH-2-DOT

Vehicle Owner's Questionnaire (VOQ)

OWNER INFORMATION (Type or Print)
 734321

Work Number: [Redacted]
 Home Number: [Redacted]

Reference No. 8002368

DEFECTS INVESTIGATION OFFICE
 15-JAN-2002
 15-JAN-2002
 15-JAN-2002

1362

Do you authorize NHTSA to provide a copy of report to the manufacturer of your vehicle? YES NO

Signature of [Redacted] in the absence of [Redacted]

VEHICLE INFORMATION

Vehicle Ident. No. (VIN) [Redacted]

Vehicle Year: 1991
 Vehicle Make: AUDI
 Vehicle Model: QUATRO

Current Odometer Reading: 210,285

VEHICLE INFORMATION

Purchase Date: May 1991
 Used New

Dealers Name: [Redacted]
 City: [Redacted]
 State: [Redacted]
 Zip Code: [Redacted]

Engine Size: [Redacted]
 Engine Type: Diesel Gas Turbo Fuel Injection

Transmission Type: Manual Automatic

Antilock Brakes: Yes No

Restraint System: Front Belt Side Belt 2-Point Belt Motorized Inverse Airbag Passenger Side Airbag

Drive Train: Front Rear 4-Wheel

Vehicle Type: Car Van Truck Sport Utility Station Wagon Pick Up Truck

FAILED COMPONENT(S)/PART(S) INFORMATION

Component: 0327000
 Part Name(s): BRAKES;HYDRAULIC;SHOE;DISC BRAKE SYSTEM

Location: Front Rear

Failed Part(s): Original Replacement

Date(s) of Failure: Aug 99, Mar 01, Sep 01, Jan 02, Apr 02
 Mileage at Failure: [Redacted]
 Vehicle Speed at Failure: [Redacted]

No of Failures: [Redacted]

APPLICATION INCIDENT INFORMATION

(Please describe in detail the incident(s), failure(s), crash(es), and injury(s) on the back of this form)

Crash: Yes No

Fire: Yes No

Number of Persons Injured: [Redacted]

Number of Failures: [Redacted]

Estimated Property Damage: [Redacted]

Reported to Police: Yes No

NARRATIVE DESCRIPTION OF FAILURE(S), INCIDENT(S), INJURY(IES)

WHEN APPLYING BRAKES VEHICLE VIBRATES. PLEASE PROVIDE ADDITIONAL INFORMATION. *AK

I have had new Audi brake pads + rotors installed at an Audi dealer 5 times in the past 50,000 miles. The new rotors continue to warp and thus provide very poor braking after only about 5000mi. This presents a severe inconvenience + is a major safety concern.

CONTINUE ON BACK IF NEEDED

The Privacy Act of 1974 (Public Law 93-502) This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.